

E-filing

Form 4. Affidavit Accompanying Motion for Permission to Appeal In Forma Pauperis

FILED

MAR 28 2008

United States District Court for NORTHERN District of CALIFORNIA

RICHARD W. WIEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
OAKLAND

Robert Elias Ventura
A.B., Plaintiff

CV 08 1708

v.

Case No.: _____

C.D., Defendant

DARRAL ADAMS

SBA

Affidavit in Support of Motion	Instructions
<p>I swear or affirm under penalty of perjury that, because of my poverty, I cannot prepay the docket fees of my appeal or post a bond for them. I believe I am entitled to redress. I swear or affirm under penalty of perjury under United States laws that my answers on this form are true and correct. (28 U.S.C. § 1746; 18 U.S.C § 1621.)</p> <p>Signed: <u>Robert Ventura</u></p>	<p>Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write in that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.</p> <p>Date: <u>3-21-08</u></p>

(PR)

My issues on appeal are: LEGAL I NEED COUNSEL; To Fight ~~my~~ ILLEGAL ENHANCEMENTS,
AND BREACH OF CONTRACT;

- (e) For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income Source	Average monthly amount during the past 12 months		Amount expected next month	
	You	Spouse	You	Spouse
Employment	\$ 0	\$ 0	\$ 0	\$ 0
Self-employment	\$ 0	\$ 0	\$ 0	\$ 0
Income from real property (such as rental income)	\$ 0	\$ 0	\$ 0	\$ 0
Interest and dividends	\$ 0	\$ 0	\$ 0	\$ 0
Gifts	\$ 0	\$ 0	\$ 0	\$ 0
Alimony	\$ 0	\$ 0	\$ 0	\$ 0
Child Support	\$ 0	\$ 0	\$ 0	\$ 0
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ 0	\$ 0	\$ 0
Disability (such as social security, insurance payments)	\$ 0	\$ 0	\$ 0	\$ 0
Unemployment payments	\$ 0	\$ 0	\$ 0	\$ 0
Public-assistance (such as welfare)	\$ 0	\$ 0	\$ 0	\$ 0
Other (specify) _____	\$ 0	\$ 0	\$ 0	\$ 0
Total monthly income:	\$ 0	\$ 0	\$ 0	\$ 0

2. List your employment history, most recent employer first.
(Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross Monthly Pay
N/A	N/A	N/A	N/A
GAY LORD CONT.	? Milpitas CA.	2003	\$ 1,800

3. List your spouse's employment history, most recent employer first.
(Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross Monthly Pay
0	0	0	0

4. How much cash do you and your spouse have? \$ ~~0~~

Below, state any money you or your spouse have in bank accounts or in any other financial institution.

Financial Institution	Type of Account	Amount You Have	Amount Your Spouse Has
N/A	N/A	N/A	N/A

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5. List the assets, and their values, which you own or your spouse owns. Do not list clothing and ordinary household furnishing.

Home	Value	Other real estate	Value
0	0	0	0

Motor Vehicle 1	Value	Make & Year	Model	Registration #
N/A	N/A	N/A	N/A	0
Motor Vehicle 2	Value	Make & Year	Model	Registration #
N/A	N/A	N/A	N/A	N/A

Other Assets	Value
0	0

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse	Amount owed to you	Amount owed to your spouse
0	0	0

7. State the persons who rely on you or your spouse for support.

Name	Relationship	Age
0	0	0

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly are.

Rent or home-mortgage payment (include lot rented for mobile home) • Are real estate taxes included? Yes / No • Is property insurance included? Yes / No	You \$ 0	Your Spouse \$ 0
Utilities (electricity, heating fuel, water, sewer and telephone)	0	0
Home maintenance (repairs & upkeep)	0	0
Food	0	0
Clothing	0	0
Laundry and dry-cleaning	0	0
Medical and dental expenses	0	0
Transportation (not including motor vehicle payments)	0	0
Recreation, entertainment, newspapers, magazines, etc.	0	0

Insurance (not deducted from wages or included in Mortgage payments) <ul style="list-style-type: none"> • Homeowner's or renter's • Life • Health • Motor Vehicle • Other: <u>NONE</u> <u>0</u> <u>N/A</u>		
Taxes (not deducted from wages or included in Mortgage payments) (Specify: <u>NONE</u> <u>0</u> <u>N/A</u>)		
Installment payments <ul style="list-style-type: none"> • Motor Vehicle • Credit card (name): • Department Store (name): • Other: <u>NONE</u> <u>0</u> <u>N/A</u>		
Alimony, maintenance, and support paid to others		
Regular expenses for operation of business, profession, or farm (attache detailed statement) <u>NONE</u> <u>N/A</u>		
Other (specify):		
Total Monthly Expenses:	<u>0</u>	<u>0</u>

9. Do you expect any major changes to your monthly income or expenses or in your assets or liabilities during the next 12 months?

 Yes X No

If yes, describe on an attached sheet.

10. Have you paid – or will you be paying – an attorney any money for services in connection with this case, including the completion of this form?

 Yes X No

If yes, how much? \$ 0 N/A

If yes, state the attorney's name, address, and telephone number.

 _____ N/A

11. Have you paid – or will you be paying – anyone other than an attorney (such as a paralegal or a typist) any money for services in connection with this case, including the completion of this form?

_____ Yes X No _____
 If yes, how much? \$ N/A 0

If yes, state the person's name, address, and telephone number.

N/A

12. Provide any other information that will help explain why you cannot pay the docket fees for your appeal.

PETITIONER IS A PRISONER, AT CALIFORNIA CORCORAN
STATE PRISON., AND INDIGENT, AND IGNORANT OF
THE LAW AND NEED ASSISTANCE.

13. State the address of your legal residence. ROBERT VENTURA V-80485

C.SP: 4A-32-44
P.O. Box 3476
CORCORAN CA. 93212-3476

Your daytime phone number: (____) 0

Your age: 42 Your years of schooling: 6 grade

Your social security number: 571-08-9544

REPORT ID: TS3030 .701

REPORT DATE: 02/01/08

PAGE NO: 1

CALIFORNIA DEPARTMENT OF CORRECTIONS

CALIF. STATE PRISON CORCORAN

INMATE TRUST ACCOUNTING SYSTEM

INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JAN. 01, 2008 THRU FEB. 01, 2008

ACCOUNT NUMBER : V80485

BED/CELL NUMBER: 4A3L0000000003L

ACCOUNT NAME : VENTURA, ROBERT ELIAS

ACCOUNT TYPE: I

PRIVILEGE GROUP: D

TRUST ACCOUNT ACTIVITY

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

CURRENT HOLDS IN EFFECT

DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
12/26/2007	H107	POSTAGE HOLD	2266 12 18	4.60
01/16/2008	H109	LEGAL POSTAGE HOLD	2549/01-11	1.31
01/17/2008	H118	LEGAL COPIES HOLD	2565/01-15	46.35
01/23/2008	H109	LEGAL POSTAGE HOLD	2640/01-17	1.31
01/23/2008	H109	LEGAL POSTAGE HOLD	2640/01-15	6.65
01/23/2008	H109	LEGAL POSTAGE HOLD	2640/01-17	1.14
01/29/2008	H118	LEGAL COPIES HOLD	2729/01-24	2.90
01/29/2008	H109	LEGAL POSTAGE HOLD	2728/01-24	2.83
02/01/2008	H118	LEGAL COPIES HOLD	2783/01-31	147.75

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	214.84	0.00

CURRENT
AVAILABLE
BALANCE

214.84-

PROOF OF SERVICE BY MAIL

BY PERSON IN STATE CUSTODY

(Fed. R. Civ. P. 5; 28 U.S.C. 1746)

I, ROBERT ELIAS VENTURA V-80485, declare that I am over 18

years of age and a party to this action. I am a resident of: 4A-32-44

CORCORAN State PRISON,

in the County of: CORCORAN,

State of California. My prison address is: P.O. Box 3476

CORCORAN CAL. 93212-3476

On MARCH 21, 2008, I served the attached: Notice OF APPEAL ;

Request For Appointment Of Counsel. AND Declaration Indigency
(Describe Document)

on the parties herein by placing true and correct copies thereof, enclosed in a sealed envelope, with postage thereon fully paid, in the United States Mail in a deposit box so provided at the above-named Correctional Institution in which I am presently confined. The envelope is addressed as follows:

United States District Court for the Northern
District.. U.S. Court House

450 Golden Gate Avenue

SAN FRANCISCO, CA 94102-3483

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on MARCH 21, 2008
(Date)

Robert Ventura
(Declarant's Signature)